



CITIZEN COMPLAINT

SI # 17-062

Please Print

Date and time of this complaint: 7/20/17 Incident #: _____

Reference Complaint #: Ticket # A8EFBHE Deputy Taking Complaint: Capt Bringham ID #: 513/06

Complainant: Stephanie Michelle Lee
First Middle Last

Address: 4228 West avenida de golf pace FL 32571
Street City State Zip Code

Home Phone: 850-261-0087 Work Phone: 850-261-0087 Cell Phone: 850-261-0087

Date and time incident occurred: 6/30/17 4:10am

Location/Address of occurrence: Hwy 90, West Spencer Field rd pace FL 32571

Employee(s) involved in allegations(s): _____

Witness:	Name	Street Address	City/State	Home Phone	Work Phone
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(List additional witnesses in narrative.)

Nature of Allegation(s): On my way to work pulled over doing w
over is what I was told. officer didn't speak on
reason for pulling me over in detail. instead
antagonized me stating "you need to learn how to
drive I should arrest you right now for child
neglect." officer I felt pushed for a reaction
out of me constantly and was very rude
and unprofessional when I didn't give the
reaction he seemed to want. I felt that if I
was breaking any law he felt necessary to
stop me for that should have been what
he expressed concern with while doing so
in a professional manner.

Santa Rosa County Sheriff's Office

Findings: _____

Actions Taken: _____

Final Clearance:

<input type="checkbox"/>	Exonerated	Proper conduct, An incident occurred as described, but the member was found not to be negligent or at fault.
<input type="checkbox"/>	Sustained	(Improper Conduct): The investigation revealed sufficient facts that the allegation(s) were found to be true.
<input checked="" type="checkbox"/>	Not Sustained	The investigation discloses insufficient evidence to clearly prove or disprove the allegation.
<input type="checkbox"/>	Unfounded	The investigation revealed sufficient facts to indicate that the incident did not occur.
<input type="checkbox"/>	Partially Sustained	The incident has two or more allegations, and at least one of the allegations is sustained.
<input type="checkbox"/>	Violation not based on original Complaint:	Investigation discloses violation(s) not mentioned in the initial allegation.

Complaint Notification of Findings:

Date: _____ By: _____

Comments: _____

☐ Please check here if the complainant refuses to have personal contact by a deputy.

I do hereby affirm that the information provided by me is true and complete to the best of my knowledge and belief. I understand That any false, misleading or untrue statements, accusations of allegations, herein made by me, either orally or in writing, to any person(s) investigating this complaint, may subject me to civil and/or criminal liability under Florida State Statute 837.06, "Whoever knowingly makes false statement in writing with the intent to mislead a public servant in the performance of his official duty shall be guilty of a misdemeanor of the second degree punishable by a definite term of imprisonment not exceeding 60 days and a fine of \$500.00."

"Any person who is a participant in an internal investigation, including the complainant, the subject of the investigation, the investigator conducting the investigation and any witnesses in the investigation, who willfully disclose any information obtained pursuant to the agency's investigation, including, but not limited to the identity of the deputy under investigation, the nature of the questions asked, information revealed or documents furnished in connection with a confidential internal investigation or any agency before such complaint, document, action or proceeding becomes public record as provided in the section, commits a misdemeanor of the first degree, punishable as provided in F.S.S. 775.082 or F.S.S. 775.083." Florida State Statute 112.533 (Penalty: up to 1 year in jail and/or up to \$1000.00 fine)

I hereby acknowledge that I have read the preceding and understand its provisions.

Signed: Stephanie M

Sworn to and subscribed before me this 10 day of July, 2017.

Witness: Capt S M Briggman (5376)
(Per F.S.S. 117.10)